



**RIPON GRAMMAR SCHOOL**



**SUITABILITY FOR BOARDING FORM**

**SIXTH FORM 2019**

This form should be completed and returned with the Sixth Form Application form.

<b>Applicant Surname:</b>	<b>First name(s):</b> <b>Known as:</b>
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<b>TO BE COMPLETED BY PARENT/GUARDIAN</b>	
<b>Full name of parent(s) with whom student resides (Mr, Mrs, Ms, Dr, etc):</b>	
<b>1.</b>	<b>2.</b>
<b>Address:</b>	<b>Address:</b>
<b>Email:</b>	<b>Email:</b>
<b>Mobile No.:</b>	<b>Mobile No.:</b>

<b>Are you in receipt of Armed Forces Boarding Allowance? YES / NO</b>	<b>Are parents/guardians resident in the UK? YES / NO</b>
<b>Does your son/daughter have any medical conditions that we should be made aware of? Please give details:</b>	<b>YES / NO</b>
<b>Why do you wish your son/daughter to board at Ripon Grammar School?</b>	
<b>Have you discussed boarding with your son/daughter? Please give details</b>	

**Addition relevant information** (Please use this section to make any further comments that you feel are relevant to your son/daughter's suitability for boarding):

TERMLY BOARDERS ONLY	
<b>Guardian contact details if parent(s) are not resident in the UK</b>	
<b>Name:</b>	<b>Address:</b>
<b>Home No.:</b>	<b>Mobile No.:</b>
<b>Email address:</b>	<b>Relationship to applicant:</b>

ALL APPLICANTS	
<b>Signature of applicant:</b>	<b>Date:</b>
<b>Parent/Guardian name (PRINT):</b>	<b>Signed:</b>
<b>Parent/Guardian email:</b>	

**PLEASE RETURN COMPLETED APPLICATION FORM(S) BY MONDAY 4 FEBRUARY 2019 TO:**

**Mrs E Griffiths, Sixth Form Co-ordinator  
Ripon Grammar School, Clotherholme Road, Ripon, North Yorkshire, HG4 2DG**

Email: [griffithse@ripongrammar.co.uk](mailto:griffithse@ripongrammar.co.uk)

Telephone: 01765 602647 ext. 264